

Form

IT-15

City of Columbus, Income Tax Division

**Employer's Deposit of City Income Tax Withheld**

DATES WAGES PAID =

Year and quarter to which this payment is to be applied

Tax Year

Qtr.

Make checks payable and mail to:

**CITY TREASURER**  
**EMPLOYER WITHHOLDING TAX**  
 PO BOX 182489  
 COLUMBUS, OH 43218-2489

Employer's Identification No./FID No.

Employer's Name and Address:

Columbus	1	Groveport	9
\$		\$	
Obetz	10	Canal Winchester	11
\$		\$	
Marble Cliff	13	Brice	14
\$		\$	
Harrisburg	16	OFFICE USE ONLY	
\$			
TOTAL - ALL CITIES			
\$			

*This form may be electronically filed and paid at [www.columbustax.net](http://www.columbustax.net)*

Rev. 10/31/08

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